



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2004 MAY 17 AM 9:04

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

~~XXXXXXXXXXXXXXXXXXXX~~ Venture Wood Floor Company

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

David D. Demers

P.O. Box 39 Moyie Springs, ID 83845

Jennifer M. Demers

P.O. Box 39 Moyie Springs, ID 83845

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

David D. Demers
P.O. Box 39
Moyie Springs, ID 83845

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Bank of America
501 W. Appleway
Coeur d'Alene, ID 83814

Phone number (optional):

(208) 667-3537

Signature: David Demers

(signature required)

Printed Name: David Demers

Capacity/Title: Owner/Operator

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE
05/17/2004 05:00
CK: 50 CT: 150010 BH: 745270
1 @ 25.00 = 25.00 ASSUM NAME # 2

D76338